

Fill in this information to identify the case:

Debtor name AA Jedson Company, LLCUnited States Bankruptcy Court for the: Southern District of New YorkCase number (if known): 24-22898☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
- ☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

\$ 0.00

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. Chase (Business account ending in *7731)	Checking	7 7 3 1	\$ 0.00
3.2. _____	_____	_____	\$ _____

4. Other cash equivalents (Identify all)

4.1. _____	\$ _____
4.2. _____	\$ _____

5. Total of Part 1

\$ 0.00

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
- ☐ Yes. Fill in the information below.

Current value of debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1. _____	\$ _____
7.2. _____	\$ _____

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8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. _____ \$ _____

8.2. _____ \$ _____

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ _____

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**☐ No. Go to Part 4.☒ Yes. Fill in the information below.**Current value of debtor's interest****11. Accounts receivable**11a. 90 days old or less: $\frac{0.00}{\text{face amount}} - \frac{0.00}{\text{doubtful or uncollectible accounts}} = \dots \rightarrow$ \$ 0.0011b. Over 90 days old: $\frac{688,958.08}{\text{face amount}} - \frac{0.00}{\text{doubtful or uncollectible accounts}} = \dots \rightarrow$ \$ 688,958.08**12. Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ 688,958.08

Part 4: Investments**13. Does the debtor own any investments?**☒ No. Go to Part 5.☐ Yes. Fill in the information below.**Valuation method used for current value****Current value of debtor's interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. _____ \$ _____

14.2. _____ \$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. _____ % _____ \$ _____

15.2. _____ % _____ \$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____ \$ _____

16.2. _____ \$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ _____

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Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
☐ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
	MM / DD / YYYY	\$		\$
20. Work in progress				
	MM / DD / YYYY	\$		\$
21. Finished goods, including goods held for resale				
	MM / DD / YYYY	\$		\$
22. Other inventory or supplies				
	MM / DD / YYYY	\$		\$
23. Total of Part 5				\$
Add lines 19 through 22. Copy the total to line 84.				

24. Is any of the property listed in Part 5 perishable?

- ☐ No
☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
☐ Yes. Book value Valuation method Current value

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested			
	\$		\$
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish			
	\$		\$
30. Farm machinery and equipment (Other than titled motor vehicles)			
	\$		\$
31. Farm and fishing supplies, chemicals, and feed			
	\$		\$
32. Other farming and fishing-related property not already listed in Part 6			
	\$		\$

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33. **Total of Part 6.**

Add lines 28 through 32. Copy the total to line 85.

\$ _____

34. **Is the debtor a member of an agricultural cooperative?**☐ No☐ Yes. Is any of the debtor's property stored at the cooperative?☐ No☐ Yes35. **Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**☐ No☐ Yes. Book value \$ _____ Valuation method _____ Current value \$ _____36. **Is a depreciation schedule available for any of the property listed in Part 6?**☐ No☐ Yes37. **Has any of the property listed in Part 6 been appraised by a professional within the last year?**☐ No☐ Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles**38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**☒ No. Go to Part 8.☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture	\$ _____	_____	\$ _____
40. Office fixtures	\$ _____	_____	\$ _____
41. Office equipment, including all computer equipment and communication systems equipment and software	\$ _____	_____	\$ _____
42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1 _____	\$ _____	_____	\$ _____
42.2 _____	\$ _____	_____	\$ _____
42.3 _____	\$ _____	_____	\$ _____

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$ _____

44. **Is a depreciation schedule available for any of the property listed in Part 7?**☐ No☐ Yes45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**☐ No☐ Yes

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Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1 _____	\$ _____	_____	\$ _____
47.2 _____	\$ _____	_____	\$ _____
47.3 _____	\$ _____	_____	\$ _____
47.4 _____	\$ _____	_____	\$ _____
48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____
49. Aircraft and accessories			
49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			
	\$ _____	_____	\$ _____
51. Total of Part 8. Add lines 47 through 50. Copy the total to line 87.			\$ _____

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☐ No
- ☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

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Part 9: Real property**54. Does the debtor own or lease any real property?**

- ☒ No. Go to Part 10.
- ☐ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1		\$ _____	_____	\$ _____
55.2		\$ _____	_____	\$ _____
55.3		\$ _____	_____	\$ _____
56. Total of Part 9. Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.				\$ _____
57. Is a depreciation schedule available for any of the property listed in Part 9?				
<input type="checkbox"/> No				
<input type="checkbox"/> Yes				
58. Has any of the property listed in Part 9 been appraised by a professional within the last year?				
<input type="checkbox"/> No				
<input type="checkbox"/> Yes				

Part 10: Intangibles and intellectual property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☒ No. Go to Part 11.
- ☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$ _____	_____	\$ _____
61. Internet domain names and websites	\$ _____	_____	\$ _____
62. Licenses, franchises, and royalties	\$ _____	_____	\$ _____
63. Customer lists, mailing lists, or other compilations	\$ _____	_____	\$ _____
64. Other intangibles, or intellectual property	\$ _____	_____	\$ _____
65. Goodwill	\$ _____	_____	\$ _____
66. Total of Part 10. Add lines 60 through 65. Copy the total to line 89.			\$ _____

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67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☐ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☐ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes. Fill in the information below.

**Current value of
debtor's interest**

71. Notes receivable

Description (include name of obligor)

0.00	—	0.00	= →	\$ 0.00
Total face amount		doubtful or uncollectible amount		

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

	Tax year		\$	
	Tax year		\$	
	Tax year		\$	

73. Interests in insurance policies or annuities

	\$
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74. Causes of action against third parties (whether or not a lawsuit has been filed)

See continuation sheet

Nature of claim

Amount requested \$

\$ Unknown

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

	\$
--	----

Nature of claim

Amount requested \$

76. Trusts, equitable or future interests in property

	\$
--	----

77. Other property of any kind not already listed Examples: Season tickets, country club membership

	\$
--	----

	\$
--	----

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ 0.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No
☐ Yes

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Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	\$ 0.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$ 0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$ 688,958.08	
83. Investments. <i>Copy line 17, Part 4.</i>	\$ 0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$ 0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$ 0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$ 0.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$ 0.00	
88. Real property. <i>Copy line 56, Part 9.</i> ➔		\$ 0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$ 0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$ 0.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ 688,958.08	+ 91b. \$ 0.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92. 688,958.08		\$ 688,958.08

Debtor 1

AA Jedson Company, LLC

First Name

Middle Name

Last Name

Case number (if known)

Continuation Sheet for Official Form 206 A/B**74) Causes of action against third parties (whether or not a lawsuit has been filed)****General description Nature of claim Amount requested Current value****Counterclaim Judgment against 400,000.00 Unknown****Plaintiff****Personal Judgment Foreclosure on 88,958.08 Unknown****Mechanic's lien**

Fill in this information to identify the case:

Debtor AA Jedson Company, LLC

United States Bankruptcy Court for the: Southern District of New York

Case number 24-22898
(If known)

☒ Check if this is an amended filing

Official Form 206E/F**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☒ No. Go to Part 2.
☐ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1 Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ _____ \$ _____

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)

Is the claim subject to offset?

- ☐ No
☐ Yes

2.2 Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ _____ \$ _____

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)

Is the claim subject to offset?

- ☐ No
☐ Yes

2.3 Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ _____ \$ _____

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)

Is the claim subject to offset?

- ☐ No
☐ Yes

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Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address Acrisure Insurance Partners of NY 90 South Ridge St. Port Chester, NY 10573	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Cancelled insurance
	Date or dates debt was incurred <u>04/2024</u> Last 4 digits of account number _____	\$ <u>2,585.72</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2	Nonpriority creditor's name and mailing address Acrisure Insurance Partners of NY 90 South Ridge St. Port Chester, NY 10573	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Cancelled insurance
	Date or dates debt was incurred <u>04/2024</u> Last 4 digits of account number _____	\$ <u>2,490.00</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.3	Nonpriority creditor's name and mailing address Acrisure Insurance Partners of NY 90 South Ridge St. Port Chester, NY 10573	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Canceled insurance
	Date or dates debt was incurred <u>05/2024</u> Last 4 digits of account number _____	\$ <u>9,118.00</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.4	Nonpriority creditor's name and mailing address Alliance Credit Union 5530 Fyler Ave. Saint Louis, MO 63139	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Monies Loaned / Advanced
	Date or dates debt was incurred <u>05/2024</u> Last 4 digits of account number _____	\$ <u>4,124.84</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5	Nonpriority creditor's name and mailing address Astoria Tile 1150 31st Ave. Astoria, NY 11106	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors
	Date or dates debt was incurred <u>09/2023</u> Last 4 digits of account number _____	\$ <u>1,800.00</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6	Nonpriority creditor's name and mailing address B&L Testing 14941 14th Ave. Queens, NY 11357	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors
	Date or dates debt was incurred <u>09/2023</u> Last 4 digits of account number _____	\$ <u>1,500.00</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ⁷	Nonpriority creditor's name and mailing address BNY Mellon 500 Ross Street Pittsburgh, PA 15262	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Cancelled insurance	\$ 2,558.43
	Date or dates debt was incurred <u>06/2024</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁸	Nonpriority creditor's name and mailing address Brown & Joseph, LLC One Pierce Plaza Suite 700 Itasca, IL 60143	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Collection Agency	\$ 365.50
	Date or dates debt was incurred <u>08/2024</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁹	Nonpriority creditor's name and mailing address Build.com 402 Otterson Dr. Ste. 100 Chico, CA 95928	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors	\$ 280.45
	Date or dates debt was incurred <u>04/2024</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁰	Nonpriority creditor's name and mailing address Chief Fire Prevention & Mechanical, Inc. 100 Grasslands Road Elmsford, NY 10523	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors	\$ 4,310.00
	Date or dates debt was incurred <u>10/2024</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹¹	Nonpriority creditor's name and mailing address Collection Bureau Hudson Valley PO Box 831 Newburgh, NY 12551	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Collection Agency	\$ 415.53
	Date or dates debt was incurred <u>08/2024</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹² Nonpriority creditor's name and mailing address

Concrete Services
40 Sea Cliff Ave.
Ste. A
Glen Cove, NY 11542

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 2,125.00

Basis for the claim: Suppliers or Vendors

Date or dates debt was incurred

06/2023

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

3. ¹³ Nonpriority creditor's name and mailing address

Construction Resources LLC
34 4th St.
Apt. 61
North Arlington, NJ 07031

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 203,748.37

Basis for the claim: Creditor seeking judgment

Date or dates debt was incurred

08/2023

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

3. ¹⁴ Nonpriority creditor's name and mailing address

CR Wallauer White Plains
30 Virginia Road
White Plains, NY 10603

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 4,409.96

Basis for the claim: Suppliers or Vendors

Date or dates debt was incurred

10/2024

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

3. ¹⁵ Nonpriority creditor's name and mailing address

Divvy
6220 America Center Dr.
Ste. 100
Alviso, CA 95002

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 28,677.51

Basis for the claim: Monies Loaned / Advanced

Date or dates debt was incurred

04/2024

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

3. ¹⁶ Nonpriority creditor's name and mailing address

Frontier Plumbing
123 Woodland Ave.
Westwood, NJ 07675

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 33,638.00

Basis for the claim: Suppliers or Vendors

Date or dates debt was incurred

08/2023

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹⁷	Nonpriority creditor's name and mailing address Good Will Mechanical 1000 Grand St. Brooklyn, NY 11211	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 18,960.00
	Date or dates debt was incurred 03/2023 Last 4 digits of account number	Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁸	Nonpriority creditor's name and mailing address Heso Electrical Inc. 34-18 Northern Blvd. Ste 4-5 Long Island City, NY 11101	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 13,245.02
	Date or dates debt was incurred 06/2023 Last 4 digits of account number	Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁹	Nonpriority creditor's name and mailing address JP Morgan Chase Bank NA P.O. Box 15369 Wilmington, DE 60197-6294	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 26,546.27
	Date or dates debt was incurred 06/2024 Last 4 digits of account number	Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ²⁰	Nonpriority creditor's name and mailing address Kalmanson Cohen PLLC 165 Broadway 23rd Floor New York, NY 10006	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 26,218.85
	Date or dates debt was incurred 10/2022 Last 4 digits of account number	Basis for the claim: Legal services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ²¹	Nonpriority creditor's name and mailing address Kalmanson Cohen PLLC 165 Broadway 23rd Floor New York, NY 10006	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 4,081.00
	Date or dates debt was incurred 05/2024 Last 4 digits of account number	Basis for the claim: Legal services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ²² Nonpriority creditor's name and mailing address

Key Bank
28 LeCount Place
New Rochelle, NY 10801

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 42,749.14

Basis for the claim: Monies Loaned / Advanced

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

06/2024

Last 4 digits of account number

3. ²³ Nonpriority creditor's name and mailing address

M&T Bank
P.O. Box 62182
Baltimore, MD 21264-2182

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 60,000.00

Basis for the claim: Monies Loaned / Advanced

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

06/2024

Last 4 digits of account number

3. ²⁴ Nonpriority creditor's name and mailing address

Merchants Mutual Insurance Company
250 Main Street
Buffalo, NY 14202

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ 11,041.77

Basis for the claim: Judgment Liens

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

04/24/2024

Last 4 digits of account number

3. ²⁵ Nonpriority creditor's name and mailing address

NYS Workers' Compensation Board
Bureau of Compliance
PO Box 5200
Binghamton, NY 13902

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 6,500.00

Basis for the claim: Workers' Compensation violation

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

08/2024

Last 4 digits of account number

3. ²⁶ Nonpriority creditor's name and mailing address

P.H. Works Inc.
1394 St. Johns Place
Brooklyn, NY 11213

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 25,600.00

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

01/2024

Last 4 digits of account number

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <u>27</u>	Nonpriority creditor's name and mailing address Patricia Jimenez, Administrator of the Estate of Jose Rosalio Vargas Garcia 7015 Park Avenue West New York, NJ 07093	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>Unknown</u>
	Date or dates debt was incurred <u>06/2023</u> Last 4 digits of account number _____	Basis for the claim: Plaintiff seeking judgment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <u>28</u>	Nonpriority creditor's name and mailing address Penn Credit Corp. 2800 Commerce Drive PO Box 988 Harrisburg, PA 17110	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>6,748.46</u>
	Date or dates debt was incurred <u>10/2024</u> Last 4 digits of account number _____	Basis for the claim: Collection Agency Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <u>29</u>	Nonpriority creditor's name and mailing address Portuguese Structural Steel 255 South Street Newark, NJ 07114	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>3,279.10</u>
	Date or dates debt was incurred <u>06/2023</u> Last 4 digits of account number _____	Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <u>30</u>	Nonpriority creditor's name and mailing address Rite-Hite Company LLC c/o Arbon Equipment Corporation 25464 Newtownk Place Chicago, IL 60673	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>190,450.98</u>
	Date or dates debt was incurred <u>09/2021</u> Last 4 digits of account number _____	Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <u>31</u>	Nonpriority creditor's name and mailing address Rite-Hite Company LLC c/o Arbon Equipment Corporation 25464 Newtownk Place Chicago, IL 60673	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>35,782.81</u>
	Date or dates debt was incurred <u>09/2021</u> Last 4 digits of account number _____	Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ³²	Nonpriority creditor's name and mailing address Seoul Glass 60-01 27th Ave. Woodside, NY 11377	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 3,919.00
	Date or dates debt was incurred 01/2024 Last 4 digits of account number	Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³³	Nonpriority creditor's name and mailing address Sunbelt Rentals 150 Nassau Ave. Islip, NY 11751	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 11,791.67
	Date or dates debt was incurred 09/2023 Last 4 digits of account number	Basis for the claim: Judgment Liens Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³⁴	Nonpriority creditor's name and mailing address T-Seventeen LLC 121 Meserole Ave. Brooklyn, NY 11222	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 2,500,000.00
	Date or dates debt was incurred 08/16/2021 Last 4 digits of account number	Basis for the claim: Creditor seeking judgment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³⁵	Nonpriority creditor's name and mailing address U.S. Small Business Administration 14925 Kingsport Road Fort Worth, TX 76155	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 150,000.00
	Date or dates debt was incurred 10/2023 Last 4 digits of account number	Basis for the claim: SBA Loan Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³⁶	Nonpriority creditor's name and mailing address Wallauer 143 North Main Street Port Chester, NY 10573	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,149.00
	Date or dates debt was incurred 06/2024 Last 4 digits of account number	Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ³⁷ Nonpriority creditor's name and mailing address

Westchester One
44 South Broadway
10th Floor
White Plains, NY 10601

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 2,700.00

Basis for the claim: Cancelled Workers' Compensation

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

03/2024

Last 4 digits of account number

3. Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3. Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3. Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3. Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1.	Allied Interstate LLC PO Box 5002 Fogelsville, PA, 18051	Line <u>3.7</u> <input type="checkbox"/> Not listed. Explain: _____	_____
4.2.	Caine and Weiner PO Box 55848 Sherman Oaks, CA, 91413	Line <u>3.15</u> <input type="checkbox"/> Not listed. Explain: _____	_____
4.3.	Erie County Supreme Court 25 Delaware Avenue Buffalo, NY, 14202	Line <u>3.24</u> <input type="checkbox"/> Not listed. Explain: _____	_____
4.4.	Getman & Biryła, LLP c/o Seth L. Hibbert, Esq. 800 Rand Building 14 Lafayette Square Buffalo, NY, 14203	Line <u>3.24</u> <input type="checkbox"/> Not listed. Explain: _____	_____
4.1.	Innovative Discovery, LLC PO Box 780154 Philadelphia, PA, 19178	Line <u>3.20</u> <input type="checkbox"/> Not listed. Explain: _____	_____
4.5.	Irena Shternfeld, Shternfeld & Fainkich PLLC 225 Broadway 3rd Floor New York, NY, 10007	Line <u>3.34</u> <input type="checkbox"/> Not listed. Explain: _____	_____
4.6.	Mullooly, Jeffrey, Rooney & Flynn LLP c/o Kerri S. Flynn 6851 Jericho Turnpike, Suite 220 P.O. Box 9036 Syosset, NY, 11791-9036	Line <u>3.33</u> <input type="checkbox"/> Not listed. Explain: _____	_____
4.7.	NCS Companies PO Box 50276 Sarasota, FL, 34232	Line <u>3.20</u> <input type="checkbox"/> Not listed. Explain: _____	_____
4.8.	NYC Department of Finance-ECB PO Box 2307 Peck Slip Station New York, NY, 10272	Line <u>3.28</u> <input type="checkbox"/> Not listed. Explain: _____	_____
4.9.	Optimum 1111 Stewart Ave. Bethpage, NY, 11714	Line <u>3.11</u> <input type="checkbox"/> Not listed. Explain: _____	_____
4.10.	United Healthcare PO Box 241029 Saint Paul, MN, 55124	Line <u>3.7</u> <input type="checkbox"/> Not listed. Explain: _____	_____
4.11.	Zavodnick, Perlmutter, & Boccia, LLC 26 Journal Square Suite 1102 Jersey City, NJ, 07306	Line <u>3.27</u> <input type="checkbox"/> Not listed. Explain: _____	_____

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. **Total claims from Part 1**

5a.

\$ 0.00

5b. **Total claims from Part 2**

5b.

+

\$ 3,443,910.38

5c. **Total of Parts 1 and 2**

5c.

\$ 3,443,910.38

Lines 5a + 5b = 5c.

Fill in this information to identify the case and this filing:

Debtor Name AA Jedson Company, LLC
United States Bankruptcy Court for the: Southern District of New York
Case number (If known): 24-22898

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☐ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☒ Amended Schedule A/B, E/F
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 11/07/2024
MM / DD / YYYY

X /s/ Michael A. Bordes
Signature of individual signing on behalf of debtor

Michael A. Bordes

Printed name

CEO/President

Position or relationship to debtor